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In re Application of:

Examiner: H. Nguyen

Group Art Unit: 2851

Confirmation No.: 4961

April 7, 2004

**AMENDMENT**

In response to the Official Action dated January 7, 2004, please amend the above-identified application as follows:

18.00 OP

00862.022246

PATENT APPLICATION

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Kazunori IWAMOTO et al.

Application No.: 09/866,600

Filed: May 30, 2001

For: STAGE APPARATUS WHICH SUPPORTS INTERFEROMETER,  
 STAGE POSITION MEASUREMENT METHOD, PROJECTION  
 EXPOSURE APPARATUS, PROJECTION EXPOSURE APPARATUS  
 MAINTENANCE METHOD, SEMICONDUCTOR DEVICE  
 MANUFACTURING METHOD, AND SEMICONDUCTOR  
 MANUFACTURING FACTORY

)  
 : Examiner: H. Nguyen  
 )  
 : Group Art Unit: 2851  
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 : Confirmation No.: 4961  
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 ) April 7, 2004  
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Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below:

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	31	MINUS	30	= 1	x \$9 \$18	\$18.00
INDEP. CLAIMS	7	MINUS	7	= 0	x \$43 \$86	\$0.00
Fee for Multiple Dependent claims \$145/\$290						—
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$18.00

☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.☒ A check in the amount of \$18.00 is enclosed including the additional claims fees.

☐ Charge \$\_\_\_\_ to Deposit Account No. 06-1205. A duplicate of this sheet is enclosed.

☒ Any prior general authorization to charge an issue fee under 37 CFR 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate of this paper is enclosed.

☐ A check in the amount of \$\_\_\_\_ to cover the fee for a two month extension is enclosed.

☐ A check in the amount of \$\_\_\_\_ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicants' undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should be directed to our address given below.

Respectfully submitted,



Attorney for Applicants  
Mark A. Williamson  
Registration No. 33,628

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